

F:\JULIE\PROCEDURES\REQUEST FOR LEAK ADJUSTMENT

CITY OF AUBURN REQUEST FOR WATER LEAK ADJUSTMENT

Mail, fax or deliver this completed form to: City of Auburn Finance Department, 25 West Main Street, Auburn, WA 98001 Fax: 253-876-1900 Phone: 253-931-3038

Customer Name	Date			
Address Where Leak Occurred				
City Account No	Phone No			
I hereby notify the City of Auburn Finance Department that I have sustained a water leak at the above address and that it has been repaired. I am enclosing a copy of the repair bill and/or materials receipt. I am requesting an adjustment to my utility billing per City Policy. I understand that signing this form does not guarantee a billing adjustment will be made.				
Approximate Date Leak Noticed	Date Leak Repaired			
Leak Repaired By				
Exact Location of Leak				
Signature of Customer				
FOR CITY USE ONLY				
		Data		
Visual Inspection of Water Meter Performed By		Date		
Comments				
Bill Cycles Adjusted	Adjust:	WATER	SEWER	вотн
Reviewed/Calculated By		Date _		
APPROVALS: Utility Accounting Mgr	Finance Director		Mayor (over \$10,000)	